

Recertification Report - CARF Accredited Organization

Provider Name			Provider Number		Begin Cert Date	End Cert Date
ABLE HANDS			1144421587		5/30/2010	5/30/2011
Organizational Practices	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Staff Training (Wyoming Medicaid rules Chapter 45, Section 26)	In-Compliance	4 of 4 staff files reviewed (100%) contained documentation of background check results, documentation that the staff met the qualifications for the service provided, and evidence of current CPR and 1st Aid certification. 3 of 4 staff had documentation of Participant Specific Training.		No	
	Emergency Drills (CARF 1.E.)	In-Compliance	Documentation that a variety of drills was run on all shifts was present for all 3 sites reviewed, including documentation of follow up on concerns, as indicated.		No	
	Emergency Procedures during Transportation (CARF 1.E.)	In-Compliance	One vehicle reviewed, had emergency procedures available during transport, per the provider's policy as well as per applicable requirements.		No	
	Internal Inspections (CARF 1.E.)	Recommendation (Systemic)	Documentation of internal inspections was present for only one of the 3 sites reviewed.		Yes	5/20/2010
	Staff Qualifications (Wyoming Medicaid rules Chapter 45, Sections 8 through 22)	In-Compliance	Staff file review shows staff meet qualifications for services provided.		No	

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	External Inspections (CARF 1.E.)	In-Compliance	Documentation of annual external inspections was present for the 3 service locations reviewed.		No	
	Progress made on prior DDD Survey recommendations	In-Compliance	With the exception of the issues readdressed in this survey, the provider continues to make progress on recommendations from the previous survey.		No	
	Progress made on prior CARF Survey recommendations	In-Compliance	With the exception of the issues readdressed in this survey, the provider continues to make progress on recommendations from the previous survey.		No	
	Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	In-Compliance	The policy and procedure was reviewed and met applicable standards.		No	
	Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	Recommendation (Focused)	2 of 3 staff interviewed were able to articulate functional knowledge of the Division's Notification of Incident Reporting process.		No	6/7/2010
	Complaint and Grievance (CARF 1.D.)	In-Compliance	The policy and procedure was reviewed and met applicable standards. The provider reports that no formal complaints or grievances were filed since the previous survey.		No	
	Restraint standards (Chapter 45, Section 28)	In-Compliance	The policy and procedure was reviewed and met applicable standards.		No	
	Transportation Requirements (CARF 1.E.9)	In-Compliance	1 vehicle was reviewed and met current requirements.		No	

Survey/Certification Staff Name: Phillip Browning, Provider Support Specialist

Date: 5/5/2010

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Participant Specific Reviews	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Releases of Information (CARF 2.B.)	In-Compliance	2 participant files were reviewed all of which contained releases of information which met applicable standards.		No	
	Emergency Information (CARF 2.B.)	In-Compliance	2 participant files were reviewed, all of which contained current and thorough emergency information. Provider has handbooks for each staff person which contain participant emergency information.		No	
	Billing and Documentation (Wyoming Medicaid Rules Chtr. 45 Sect. 27)	In-Compliance	Through review of Supported Living, and Day and Residential Habilitation documentation, which meets current standards.		No	
Case Management Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Case manager monthly/quarterly documentation meets requirements of Chapters 41, 42 and 43, and DD rule, Chapter 1	Recommendation (Systemic)	Provider did not have monthly/quarterly documentation of case management services for three of the months reviewed.		No	6/7/2010
	Development and Tracking of Objectives (Chapters 41, 42, and 43 and DD rule, Chapter 1)	In-Compliance	Provider documentation showed evidence of tracking progress on goals each month of documentation observed.		No	

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	Monitoring implementation of the IPC (Chapters 41, 42, and 43 and DD rule, Chapter 1)	Recommendation (Systemic)	Provider failed to submit modifications to the IPC to switch case management to the new case manager NPI # on the preapproval form.		No	6/7/2010
Residential Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	In-Compliance	One residential site was visited, and showed evidence of maintaining a healthy and safe environment.		No	
	Organization meets CARF Standards on Community Housing (CARF Section 4.J)	In-Compliance	Through observation, interview, and a review of documentation, the provider is meeting these standards.		No	
	The organization meets the standards in Chapter 45, section 23)	In-Compliance	Through observation, interview, and a review of documentation, the provider is meeting these standards.		No	
Day Habilitation, Employment Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	The organization meets the standards for Community Integration (CARF 4.E)	In-Compliance	The organization meets the standards, as evidenced by documentation review and service observation. The provider continues to offer numerous and varied opportunities for community access. Participants specifically expressed satisfaction with this aspect of their services.		No	

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	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	In-Compliance	Through documentation review and service observation, the provider showed evidence of maintaining a healthy and safe environment in all service settings.		No	
	Organization meets the standards for the service provided (CARF Standards and Medicaid rules)	In-Compliance	The organization meets the standards, as evidenced by documentation review, participant interview, and service observation.		No	
Other Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Organization maintains a healthy and safe environment (CARF 1.E.10 and WMR Chapter 45, Section 23)	In-Compliance	One Support Living location was observed, which provided evidence of maintaining a healthy and safe environment.		No	
	Organization meets the standards for the service provided (CARF Standards and WMR Chapter 41-45)	In-Compliance	3 months of Support Living documentation was reviewed for one participant and met applicable standards.		No	

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